



Encoding of Guideline III: Modeling Drug Information

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Available from previous sessions

- Formal statements to be encoded
- An ATP3 knowledge base with
 - Concept hierarchy
 - Eligibility criteria, goals, and risk groups
 - Clinical algorithm
- Working EON/ATHENA test environment





Goals of this session

- Understand how to model drug information
 - "Drug Usage": indications, contraindications, drug partners,...
 - "Guideline Drug": Choice of specific drugs and dose levels
- Understand how to make detailed drug recommendations in DSS





Outline

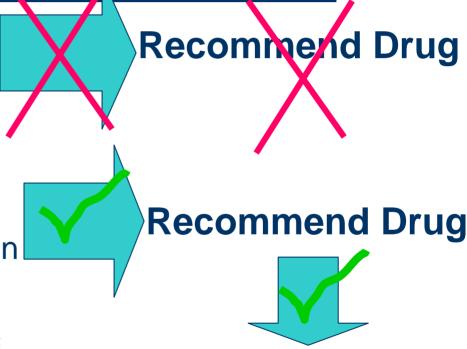
- "Drug Usage"
 - Modeling indications, contraindication, & other relationships
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"Drug Usage" and Behavior of DSS

- Strong contraindication
- Drug Partner to avoid
- Compelling indication
- Relative indication
- Relative contraindication
- Preferred drug: specific drug to add (formulary)

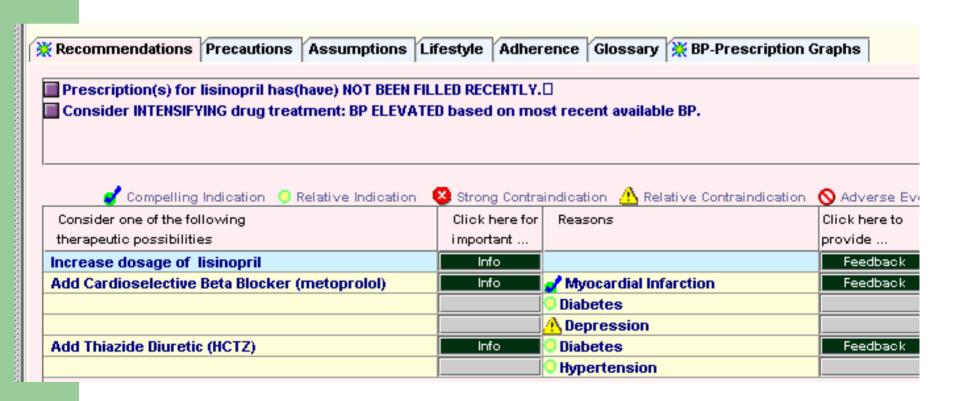


Recommend Simvastatin





Generated Recommendations

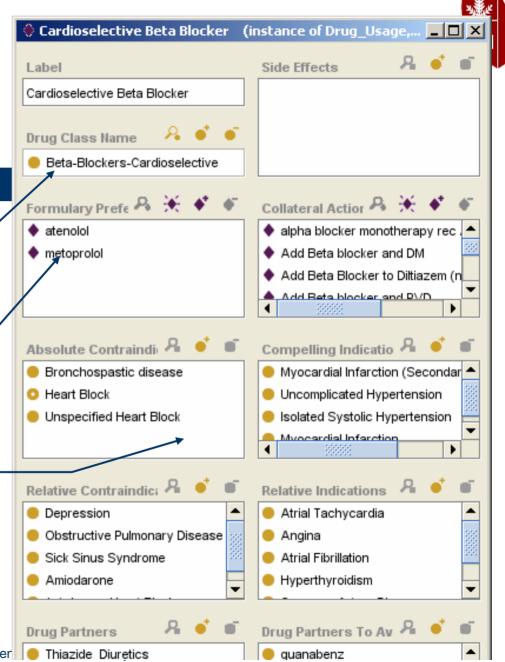




Link to concept in drug hierarchy

Link to specific drug and dosing details

Indications and contraindications





Workshop Activity 1: Adding indications/contraindications

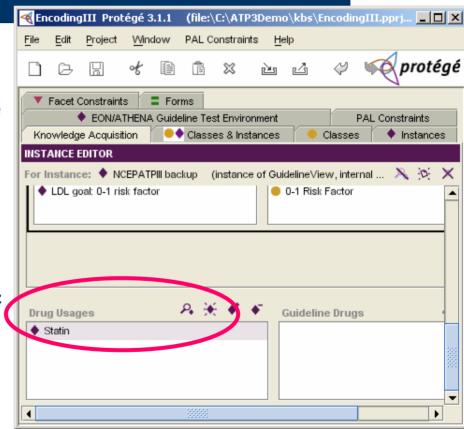
- Statins
 - Compelling Indication: LDL outside goal range
 - Absolute contraindication: Active or chronic liver disease
- Bile acid sequestrants
 - Absolute contraindication: Triglycerides>400 mg/dl





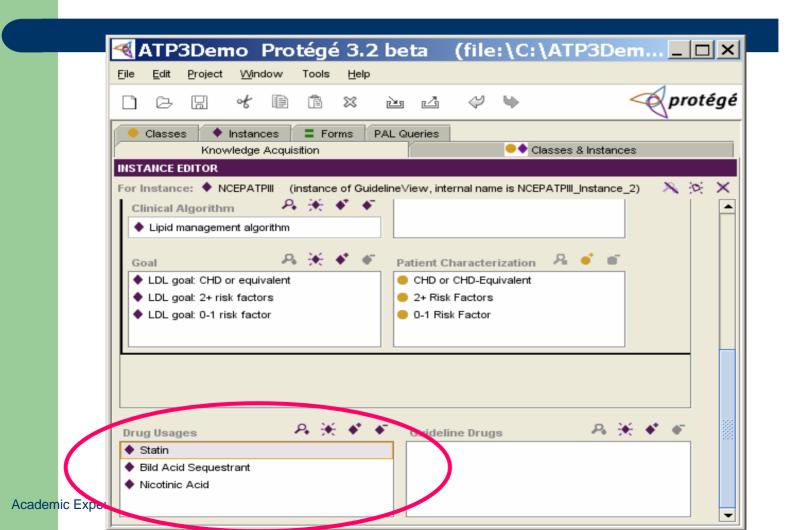
Add properties of drug class

- Demonstration
 - Create Drug Usage instance: Statins
 - Add compelling indications and absolute contraindications of Statins





Your turn: Create other drug usage instances







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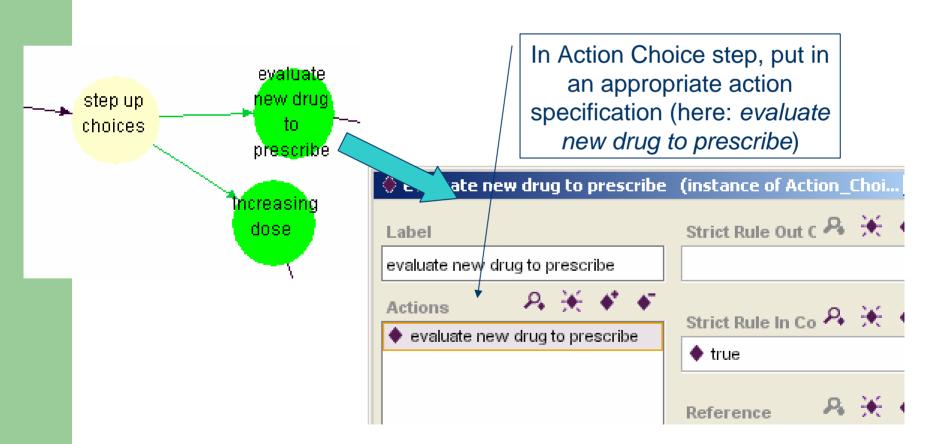
Adding drug recommendation

- Patient scenario: Low Risk category not on any lipid-lowering drug
- Recommendations:
 - Order lipid profile
 - Encourage maintenance of therapeutic lifestyle changes
 - LDL not at goal, start therapeutic lifestyle changes
 - LDL not at goal, start lipid-lowering therapy





Use of Drug Usage in ATHENA HTN





Actions that make use of drug usage information

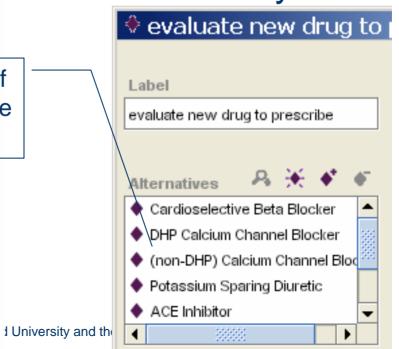
Instance of

Drug Usage

- ▼ O Activity_Act

 Modify_Activity
 Start_Activity
 Step_Down_Activity
 - Step_Up_Activity
 - Stop_Activity
 - Substitute_Activity
 - Acute Prescription
 - Collect_Patient_Data
 - Evaluate_Activity_Act
 - Evaluate_Current_Activity
 - Evaluate_Modify_Activity
 - Evaluate_Decrease_Activity_Intensity
 - Evaluate_Increass_Activity_Intensity
 - Evaluate Start Activity
 - Evaluate Stop Activity
 - Evaluate_Substitution_Activity

ATHENA-HTN
 Example: Evaluate
 Start Activity

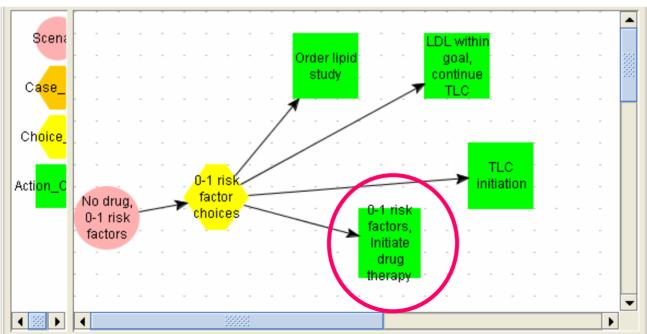






Workshop activity 2: Add add-drug recommendation to "initiate drug therapy" action

 Add drug recommendation in *Initiate drug* therapy action choice



Academic Expert supplement reject - A collaboration between stanlard oniversity and the VA rate Alice

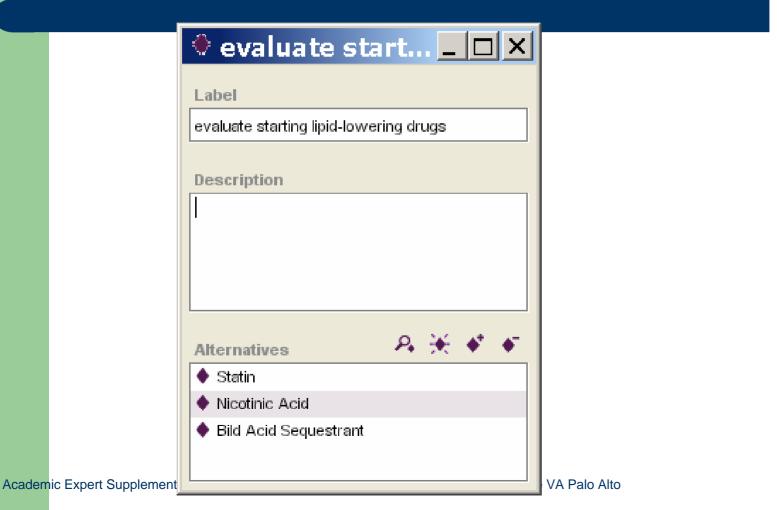


Step 1: Create a new instance of Evaluate_Start_Activity





Step 2: Add instances of Drug Usage as alternatives







Step 3: Test the system

- Go to Guideline Test Environment tab
- Test with low-risk patient not on lipidlowering therapy who has LDL of 200 mg/dL





Questions?





Outline

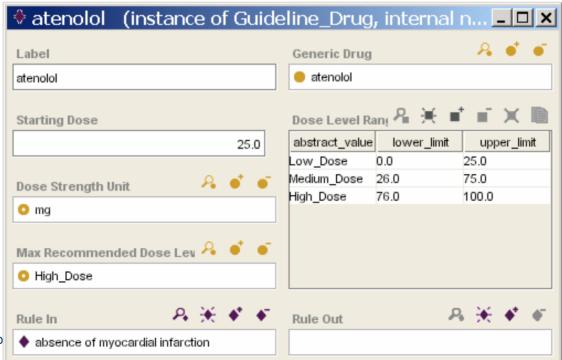
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"Guideline Drugs"

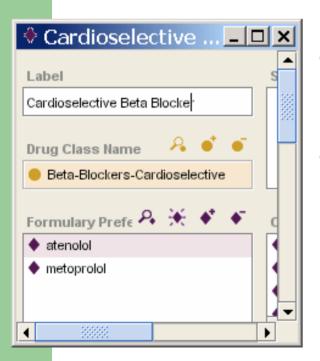
 Specify drug preference and dosing information at the level of generic drug





How Guideline Drug information is used: Formulary preferred drugs

Add DHP Calcium Channel Blocker (felodipine, nifedipine Add Cardioselective Beta Blocker (atenolol)



- Recommend adding drug class because of indications
- Select recommended formulary preferred drug

Workshop activity 3: Adding Guideline Drugs

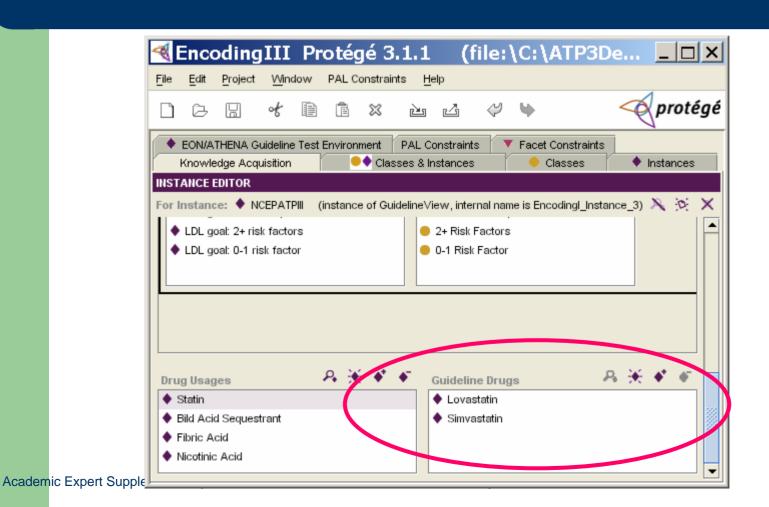
VA Formulary

Drug Name	Preference	Low Dose	High Dose
Lovastatin	1 st choice	20-30 mg/day	31-40 mg/day
Simvastatin	2 nd choice	40-60 mg/day	61-80 mg/day





Create instances of Guideline Drug

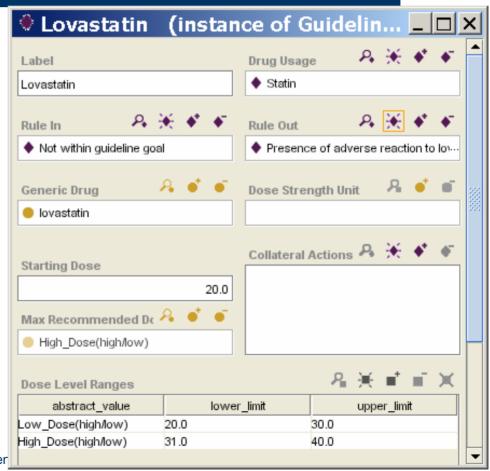






Demonstration: Adding Lovastatin

- First choice
 - rule in: LDLnot withinguideline goalrange
 - rule out:presence of adversereaction







Add Simvastatin





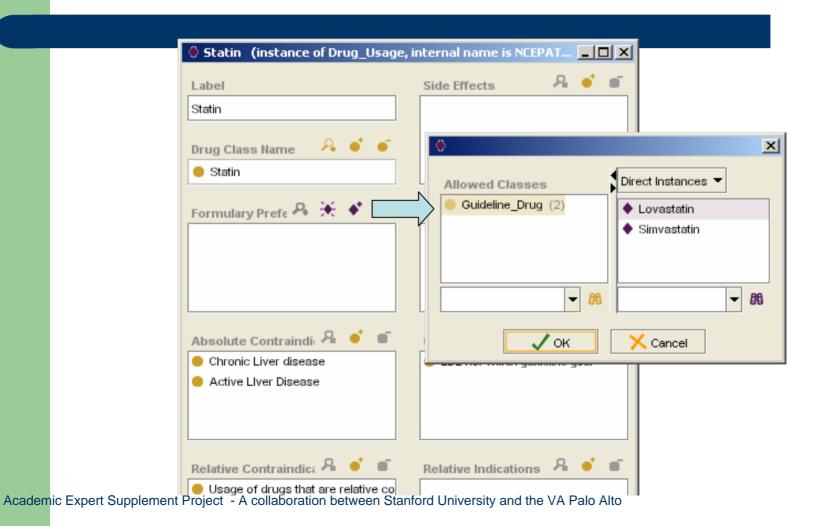
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Workshop Activity 4: Add Lovastatin and Simvastatin as formulary preferred drugs







Test the system

- Run test case of low-risk patient with no med and LDL = 200 mg/dL
- Add adverse reaction to lovastatin and run the case again



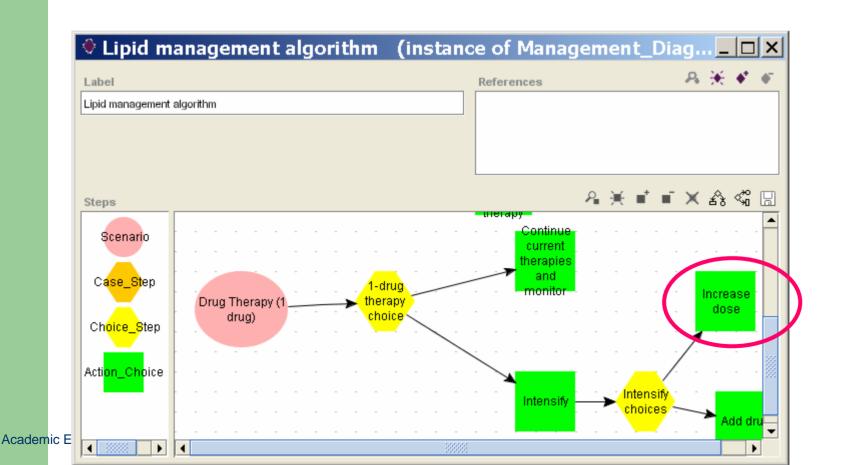


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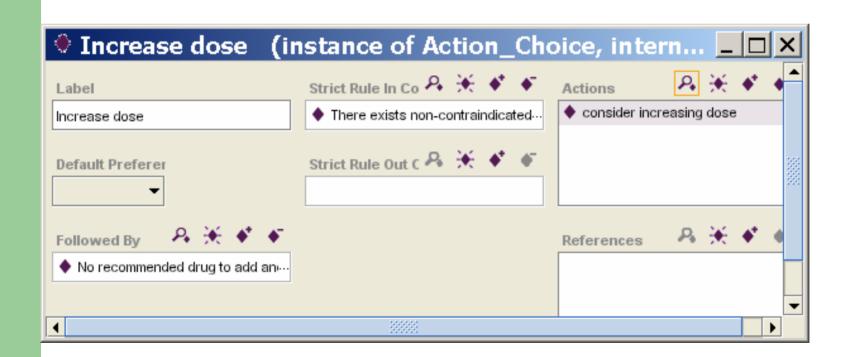
Use dose information to recommend increasing dose







Increase dose action choice



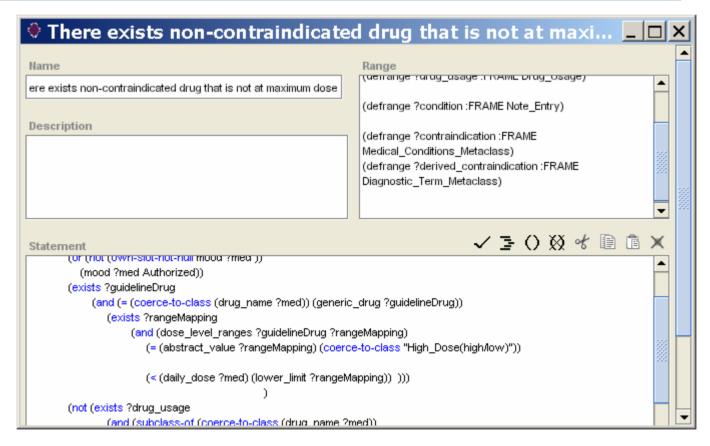


Strict rule-in criterion for increasing dose

- There exists a prescription for which
 - The prescribed drug is not contraindicated
 - The prescribed drug is a Guideline Drug
 - The daily prescribed dose < lower limit of the maximum dose level



Bad news: Strict rule-in criterion for increasing dose is complex



Good news: Complex criterion has to be written only once

- Strict rule-in criterion for increasing dose applies to all Guideline Drug instances
- Most of the time encoders only work with Guideline Drug instances



Workshop Activity 5: Test increasing dose

- Go to EON/ATHENA Guideline Test Environment tab
- Test with low-risk patient who has
 - Lovastatin medication at 20 mg/day
 - LDL of 200 mg/dL
- Test with low-risk patient who has
 - Lovastatin medication at 40 mg/day
 - LDL of 200 mg/dL





Summary

- Modeling drug information
 - Indications/contraindications of drug classes as Drug Usage instances
 - Selection and dosing of generic drugs as Guideline Drug instances
- Drug recommendations (add, substitute, delete, increase dose) can be generated based on drug information